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Date:	August 23, 2004	Fax:	703-872-9306
To:	U.S. Patent and Trademark Office	Phone:	
Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450			
From:	David C. Hsia		
Serial No.:	10/683,962		
Docket:	KUO-P102-1C (ANS-KUO-P102-1C)		
Re:	Response to Office Action		
Pages:	11 (including cover sheet)		

Message:

Re: Applicant(s): Yee-Chung Fu, Chang-Li Hung
 Assignee: Unassigned
 Title: MEMS Scanning Mirror with Distributed Hinges and Multiple Support Attachments
 Serial No.: 10/683,962
 Examiner: Seung H. Lee
 Docket No.: KUO-P102-1C
 (ANS-KUO-P102-1C)

Filed: October 10, 2003
 Group Art Unit: 2876

Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Transmittal Letter (1 page in duplicate); and
- (2) Response to Office Action (7 pages), including a copy of the Express Abandonment of related application serial no. 10/648,551 (1 page).

The information contained in this message is intended only for the personal and confidential use of the designated recipient(s) named above. This message may be an attorney-client communication and may be protected by the work product doctrine. As such, this document is privileged and confidential. If the reader of this message is not the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, distribution, or copying of this message is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and destroy any copies of this document in your possession. Thank you.



Brian D. Ogonowsky

Carmen C. Cook

David C. Hsia

Rachel V. Leiterman

August 23, 2004

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- ☐ No additional fee is required.
☒ The fee has been calculated as shown below:

	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra	Rate		Additional Fee
Total Claims	20	Minus	20	=	0	x \$9	\$	0.00
Independent Claims	3	Minus	3	=	0	x \$43	\$	0.00
<input type="checkbox"/>	Fee of _____ for the first filing of one or more multiple dependent claims per application							\$
<input checked="" type="checkbox"/>	Extension of Time Fee (1 month)							55.00
<input checked="" type="checkbox"/>	Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.							0.00
<input checked="" type="checkbox"/>	Please charge our Deposit Account No. 502226 in the amount of							55.00
<input checked="" type="checkbox"/>	Also, charge any additional fees required and credit any overpayment to our Deposit Account No. 502226.							
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Signature	Date 8/23/2004

Respectfully submitted,

David C. Hsia
 Attorney for Applicant(s)
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David C. Hsia
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